

PREFERENCE POINTS CERTIFICATION

Use this format if one is not provided by the Lead agency.

DATE:

TO: GOVERNOR'S OFFICE OF EMERGENCY SERVICES
LAW ENFORCEMENT AND VICTIM SERVICES DIVISION

FROM: Community Contact
Enterprise Zone Program

SUBJECT: PREFERENCE POINTS

(check only one box)

(5%) The applicant named below has targeted this enterprise zone for grant-related activities.

(2%) The applicant named below has not specifically targeted this enterprise zone for grant-related activities. However, the applicant provides needed services to residents of this community.

Name: _____
(Applicant)

Name: _____
(Project)

Address: _____

(Program) Zone

I certify that I have reviewed the proposed project and that it meets the eligibility requirements for preference points as required by *California Government Code Section 7082*.

Typed Name of Enterprise Zone Contact Title

Signature of Enterprise Zone Contact Date

Name of Enterprise Zone Agency

Address

Telephone Number (with area code) FAX Number (with area code)